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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

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Substitute for form 1449/PTO

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Filing Date First Named Inventor

**Application Number** 

10/580,023-Conf. #7549 May 19, 2006 Gauthier Pouliquen

Complete if Known

Art Unit 1654

Examiner Name S. Gudibande

022290.0159PTUS Attorney Docket Number

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Receipt date: 09/25/2009 10580023 - GAU: 1654

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Sheet	sheet 5 of 7		Attorney Docket Number	022290.0159PTUS		

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Sheet	6	of	7	Attorney Docket Number	022290.0159PTUS	

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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	(0 )	Date	
LAGITITION	/Satuanarayan (Audihanda/	Date	00/04/0044
Signature	/Salvanaravan Guulbange/	Considered	I 06/01/2011
Signature	·,,	Considered	00/01/2011
Cignature		Considered	00/01/2011

<sup>&#</sup>x27;Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.